

Women's Health E-brief 2013

MARCH

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http://www.cdc.gov/washington/womens_ebrief.html

The Centers for Disease Control and Prevention (CDC) is our nation's health protection agency. CDC tracks diseases, researches outbreaks, and responds to emergencies of all kinds; working with health agencies, local and state governments, communities, academia, professional organizations, and other partners to better understand and improve population health, at every stage of life. Our scientists and disease detectives work 24/7 all around the world.

This e-brief highlights select CDC contributions to the health of women in 2012. Many of CDC's programs and activities that focused exclusively on women's health, or had significant implications for women, fall into three overarching agency priorities, including: strengthening the public health system; health security at home and abroad; and, collaboration between public health and health care.

March is **Women's History Month**, and the 2013 theme is "Women Inspiring Innovation through Imagination: Celebrating Women in Science, Technology, Engineering, and Mathematics (STEM)."

CDC recognizes the many contributions made by women at CDC that work in STEM fields and related careers, including chemistry, microbiology, epidemiology, medicine, and engineering. All share the common goal to help people live safer, healthier, and better quality lives.

Strengthen the Public Health System

Supplemental Funding for the National Breast and Cervical Cancer Early Detection Program

CDC's National Breast and Cervical Cancer Early Detection Program (NBCCEDP) provides access to breast and cervical cancer screening services to underserved women in all 50 states, the District of Columbia, five U.S. territories, and 12 tribes. In September 2012, CDC awarded supplemental funding from the Prevention and Public Health Fund, created by the Affordable Care Act, to 43 states, 3 tribes or tribal organizations and 3 U.S. territories. Grantees will use these awards to increase the number of breast and cervical cancer screenings provided by the program.

<http://www.cdc.gov/cancer/nbccedp/>

Cancer Innovation Grants

In June 2012, CDC awarded a new five year cooperative agreement to states, tribes and territories which funds three national cancer programs, including the NBCCEDP. In one component of the cooperative agreement CDC awarded innovation grants to the New York State Department of Health and the Minnesota Department of Health to increase breast and cervical cancer screening rates and timely follow-up care. Grantees are piloting interventions such as development of a cancer screening registry which will support a uniform data-entry system to track quality of screening care and promote quality improvement among providers; and direct mail client reminders to reach individuals who remain largely outside the health care system.



Centers for Disease Control and Prevention
Office of the Associate Director for Policy

Dating Matters™: Strategies to Promote Healthy Teen Relationships

In 2012 CDC awarded \$7 million to four communities (Baltimore, Chicago, Fort Lauderdale, and Oakland) for its new teen dating violence prevention initiative, Dating Matters™. Local health departments will lead their communities in developing, implementing, and evaluating a comprehensive approach to prevent teen dating violence before it starts. Dating Matters™ focuses on 11- to 14-year-olds in high-risk, urban communities. It includes preventive strategies for individuals, peers, families, schools, and neighborhoods.

<http://www.vetoviolence.org/datingmatters/>

Tips from Former Smokers

In 2012, CDC launched a 12-week national tobacco education campaign, Tips from Former Smokers, to increase awareness about the human suffering caused by smoking and to encourage people to quit. This campaign featured eight women, many of whom started smoking in their teens, who suffered from smoking-related illnesses. Approximately 130,000 women visited the www.smokefree.gov website, where they could get free information and help to quit smoking. Smoking causes an estimated 80% of all lung cancer deaths in women. Compared with nonsmokers, smoking is estimated to increase the risk of women developing lung cancer by 13 times. Unfortunately, 18% of women in the United States still smoke cigarettes; however, surveys indicate that at least three out of four of them want to quit.

<http://www.cdc.gov/tobacco/campaign/tips/>



Assisted Reproductive Technology (ART) Surveillance Summary

The latest Assisted Reproductive Technology Surveillance Summary was released in November 2012. This is the first state-specific report on ART use and outcomes. For each U.S. state and territory, embryo transfer practices, and contribution of ART to all infants born in the state, multiple deliveries, as well as low birth weight and prematurity are presented.

<http://www.cdc.gov/ART/pubs.htm>

The Right to Know Campaign

Following the release of new breast cancer screening guidelines by the U.S. Preventive Services Task Force, CDC embarked on a strategic, far-reaching communication initiative to increase awareness and breast-cancer screening for women with disabilities. CDC updated the Right to Know breast cancer screening campaign content, and offers web-based, bi-lingual materials for download. Messages were disseminated through a variety of communication channels.

<http://www.cdc.gov/ncbddd/disabilityandhealth/righttoknow/>

Take Charge. Take the Test.

CDC developed Take Charge. Take the Test. (TCTT), a phase of the Act Against AIDS campaign designed to increase HIV testing among African American women aged 18–34. Take Charge. Take the Test™ is a social marketing campaign developed to encourage African American women to get tested for HIV and the information they need to take charge of their health. The campaign was informed by significant research with African American women across the U.S., as well as by nationally-renowned social marketing consultants, target audience experts, and leaders in HIV/AIDS prevention.

<http://www.cdc.gov/actagainstaids/>

Breastfeeding

CDC works with states to develop wellness policies that support breastfeeding and improve breastfeeding support practices. CDC developed breastfeeding support and practice guides for physicians, nurses, and others. With funding from CDC to local communities, the Community Transformation Grants, Racial and Ethnic Approaches to Community Health, and Communities Putting Prevention to Work programs are implementing breastfeeding strategies that include: implementation of workplace wellness policies that support breastfeeding during working hours; improving breastfeeding support practices and increasing Baby-Friendly Hospitals; and, changing childcare environments to be more supportive of breastfeeding for both families and providers. <http://www.cdc.gov/breastfeeding/>



Strengthen Health Security at Home and Abroad

Disasters and Pregnant Women

Research studies conducted after disasters in the US have shown that pregnant women may have increased medical risks. CDC began to address these issues and build capacity to respond to all types of events and track their effects on women and infants. <http://emergency.cdc.gov/disasters/pregnant.asp> and <http://www.cdc.gov/ncbddd/disasters/women.html>, and <http://www.cdc.gov/reproductivehealth/Emergency/>

Hepatitis E Virus Cases among At-Risk Pregnant Women – East Africa

In the summer 2012, the first suspected cases of Acute Jaundice Syndrome were detected in S Sudan and Kenya. As of September 15, 2012, a total of 179 suspected and confirmed Hepatitis E cases and 4 deaths have been reported from three refugee camps. Serum specimens collected from the suspected cases confirmed that the outbreak was caused by Hepatitis E Virus (HEV) infection. Assistance from CDC was requested and CDC epidemiologists and EIS officers travelled to South Sudan in November 2012 to help strengthen the ongoing active case finding and surveillance efforts, enhance surveillance efforts among at-risk populations (e.g. pregnant women), and identify risk factors and predictors of severe morbidity and high mortality among known or newly identified high-risk groups.

Management of Pregnant and Postpartum Women During an Anthrax Attack

CDC is preparing guidance for the management of pregnant and postpartum women during an anthrax attack. CDC has done a systematic review of worldwide literature to study anthrax in pregnant and postpartum women, which was published in the journal *Obstetrics and Gynecology*. CDC also conducted an experts panel called "Anthrax: Special Considerations for Pregnant and Postpartum Women" to review the antibiotics used for the treatment and prophylaxis of anthrax in this population. <http://emergency.cdc.gov/disasters/pregnant.asp>

Strengthen Collaboration between Public Health and Health Care

Identification of Pregnant Women with Hepatitis B Infection through Laboratory-Health Department Collaboration

CDC, in collaboration with the four largest US commercial laboratories, health departments, and professional societies and organizations, evaluated potential mechanisms to convey pregnancy status with positive hepatitis B virus (HBV) results reported to state and local health departments. By December 2012, several of the laboratories had implemented reporting of positive HBV tests with improved identification of tests from pregnant women, and by the spring of 2013, the remaining laboratories will implement similar reporting mechanisms. These and other mechanisms are being adapted to other reportable diseases for which pregnancy status is relevant to public health intervention.

TRxearing for Two: Safe Medication Use in Pregnancy

In January 2012, CDC launched the TRxearing for Two: Safe Medication Use in Pregnancy initiative, to improve the available safety and risk information on medications frequently used by reproductive-aged women. Approximately 90% of all women take at least one medication while pregnant, yet only 9% of those medications approved by the Food and Drug Administration from 1980-2010 had sufficient scientific evidence to determine their risk for birth defects when used during pregnancy. Through this initiative, CDC has increased awareness of safe medication use during pregnancy, and established an interagency coalition of federal partners (CDC, FDA, AHRQ, NIH, and HRSA) to collaborate on medications and pregnancy research and programmatic activities. Additionally, CDC drafted a prototype for a formal review process to evaluate the quality and strength of existing evidence for fetal risk associated with commonly used medications in pregnancy.

Working to Reduce Ethnic Disparities in the Occurrence of Folic Acid-Preventable Neural Tube Defects in the U.S.

Hispanics continue to have higher rates of neural tube defects than non-Hispanic whites and non-Hispanic blacks, and Mexican Americans have lower total folic acid intake than non-Hispanic whites. In 2010, the Corn Masa Flour Fortification Partner Group requested CDC provide scientific technical assistance in the development of a food additive petition to FDA. The petition would allow for the fortification of corn masa flour (CMF) with folic acid. In October 2011, CDC provided scientific technical assistance on safety issues, intake of folic acid and the potential number of neural tube defects that could be prevented through CMF fortification. In February 2012, the Corn Masa Flour Fortification Partner Group filed the petition with the FDA; and CDC is fulfilling scientific information requests from FDA, as requested.

Safety and Health among Hotel Cleaners

CDC convened a partner meeting to develop the National Services Agenda, which includes safety and health goals for the Accommodations Industry. Groups such as unions, worker organizations, government agencies, and hotel/motel associations can build partnerships to implement these goals and help ensure that hotels are safe for all employees, a disproportionate share of which are women. The 2012 report is available at <http://www.cdc.gov/niosh/docs/2012-151/pdfs/2012-151.pdf>.

The Act Against AIDS Leadership Initiative

The Act Against AIDS Leadership Initiative (AAALI) is a six-year partnership between CDC and leading national organizations representing the populations hardest hit by HIV. Launched in 2009, CDC partners with organizations such as the Black Women's Health Imperative, Congressional Black Caucus Foundation, National Council of Negro Women, Sigma Gamma Rho Sorority, Inc. and others to address HIV among African American women.

<http://www.cdc.gov/actagainstaids/partnerships/index.html>

U.S. Medical Eligibility Criteria for Contraceptive Use

The U.S. Medical Eligibility Criteria (MEC) for Contraceptive Use provides guidance on whether women and men with particular medical conditions or physical characteristics can safely use certain methods of contraception. In 2012, CDC published an update on the recommendations for hormonal contraceptive use among women at high risk for HIV or infected with HIV, based on new scientific evidence.

http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6124a4.htm?s_cid=mm6124a4_w

CDC Advisory Committee for Immunization Practices Recommends Tdap Immunization for Pregnant Women

In 2012, the Advisory Committee for Immunization Practices recommended that providers of prenatal care implement a pertussis Tdap immunization program for all pregnant women. By getting Tdap during pregnancy, maternal pertussis antibodies transfer to the newborn, likely providing protection against pertussis in early life, before the baby starts getting DTaP vaccines. The Tdap vaccine is now recommended for all women in the third trimester (ideally 27th through 36th week of their pregnancy), even if they have previously received Tdap vaccine. The U.S. remains on track to have the most reported pertussis cases since 1959, with more than 32,000 cases already reported along with 16 deaths, the majority of which are in infants. http://www.cdc.gov/media/releases/2012/a1024_Tdap_immunization.html

Updated Recommendations for Pregnant Women:

http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6207a4.htm?s_cid=mm6207a4_w



AMIGAS: Increasing Cervical Cancer Screening for Hispanic Women

AMIGAS stands for “Ayudando a Las Mujeres con Información, Guía y Amor para su Salud.” In English, this means “Helping Women with Information, Guidance, and Love for Their Health.” AMIGAS is a bilingual educational outreach intervention designed to help *promotoras* (community health workers) and other lay health educators increase cervical cancer screening among Latinas who have rarely or never had a Pap test. CDC funded a recent randomized controlled trial that showed AMIGAS is effective in promoting cervical cancer screening (Pap tests) among Latinas ages 21 to 65.
http://www.cdc.gov/cancer/cervical/what_cdc_is_doing/amigas.htm

Selected Research and Surveillance Publications

Racial Disparities in Breast Cancer Severity — United States, 2005–2009

http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6145a5.htm?s_cid=mm6145a5_w

Estimated HIV Incidence in the United States, 2007–2010

http://www.cdc.gov/hiv/surveillance/resources/reports/2010supp_vol17no4/index.htm

Increased Risk of Rare Cancer as DES Daughters Age

http://www.cdc.gov/cancer/dcpc/research/articles/des_risk.htm

Study Examines the Role of Intimate Partner Violence in Workplace Homicides Among U.S. Women

<http://www.cdc.gov/NIOSH/updates/upd-05-03-12.html>

National Estimate Shows Not Enough Young Women Tested for Chlamydia

<http://www.cdc.gov/nchhstp/newsroom/stdconference2012pressrelease.html>

Current Contraceptive Use in the United States, 2006–2010, and Changes in Patterns of Use Since 1995.

<http://www.cdc.gov/nchs/data/nhsr/nhsr060.pdf>

Vital Signs: Hospital Practices to Support Breastfeeding — United States, 2007 and 2009.

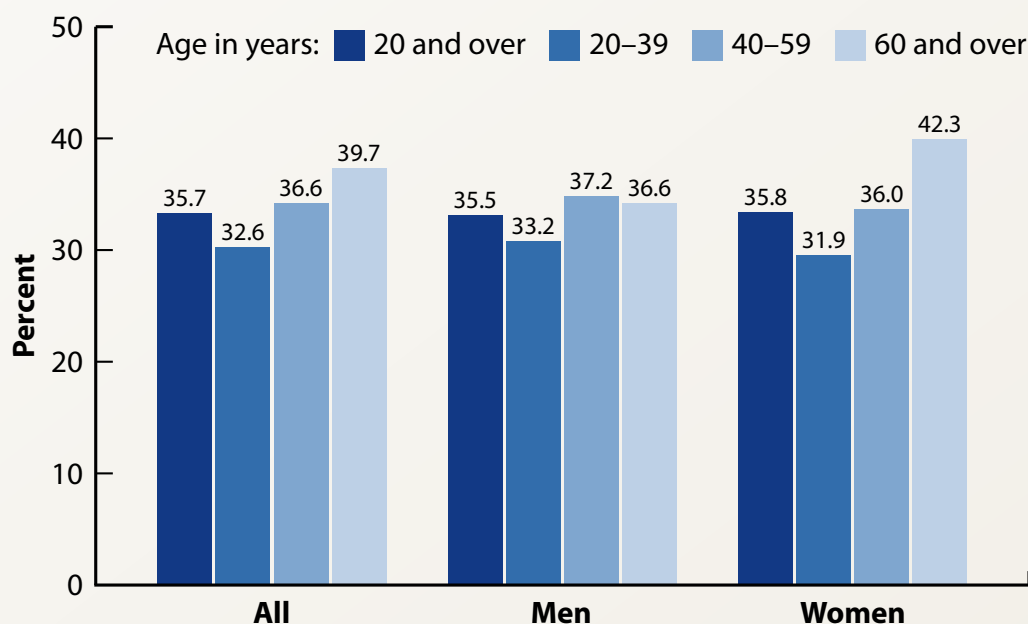
http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6030a4.htm?s_cid=mm6030a4_w



Data and Trends

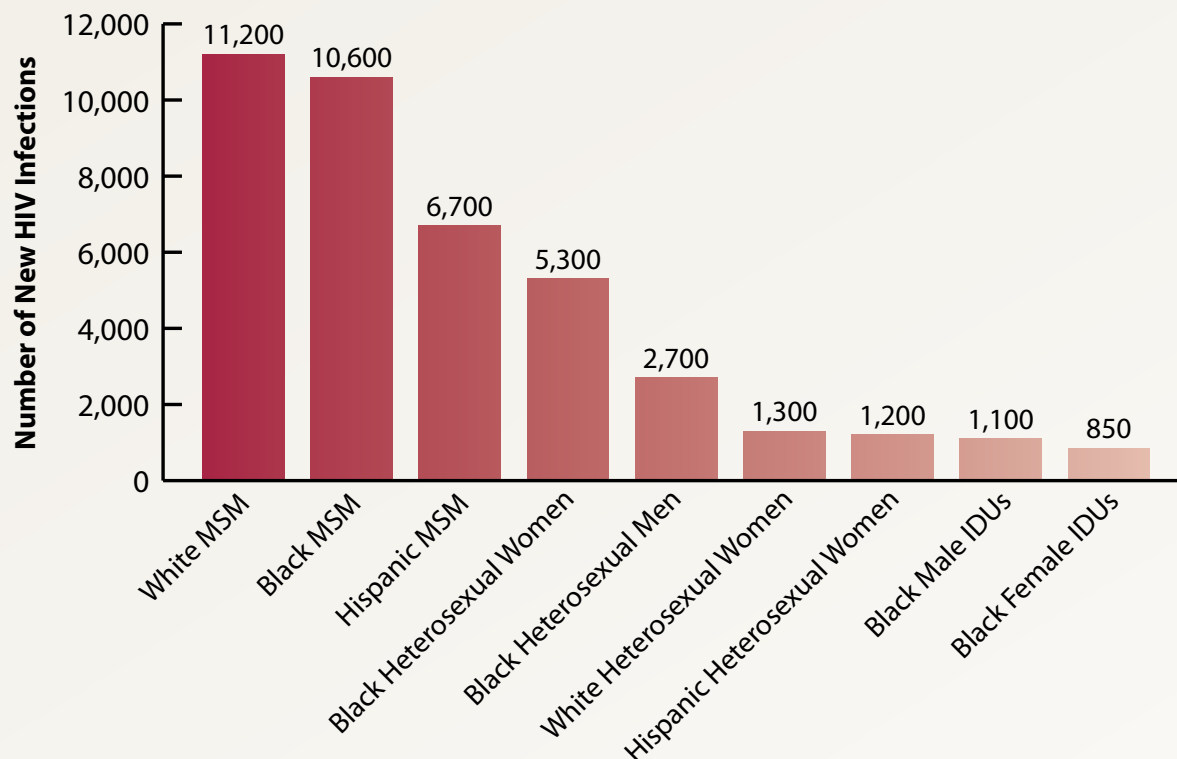
Prevalence of obesity among adults aged 20 and over, by sex and age: United States, 2009–2010

<http://www.cdc.gov/nchs/data/databriefs/db82.htm>



Estimated New HIV Infections in the United States, 2010, for the Most-Affected Sub-Populations

<http://www.cdc.gov/nchhstp/newsroom/docs/2012/HIV-Infections-2007-2010.pdf>



Birth Rates Among Women Aged 15–44 Years, by Maternal Age Group — National Vital Statistics System, United States, 1961, 2007, and 2011

<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6147a7.htm>

